## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

057345714

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |             |   |  |                                |              |                  |          | SMALL ENTITY TYPE  |                        |        | OTHER THAN SMALL ENTITY |                        |  |
|--|-------------|---|--|--------------------------------|--------------|------------------|----------|--------------------|------------------------|--------|-------------------------|------------------------|--|
| TOTAL CLAIMS   |             |   |  |                                | ( a          |                  |          | RATE               | FEE                    | 1      | RATE                    | FEE                    |  |
| FOR  |             |   | NUMBER FILED   |                                | NUMBER EXTRA |                  |          | BASIC FEE          | 355.00                 | OR     | BASIC FEE               | 710.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |             |   | ]  |                                | *            |                  |          | X\$ 9=             |                        | OR     | X\$18=                  |                        |  |
| INDEPENDENT CLAIMS   |             |   | /  |                                | *            |                  |          | X40=               | 40                     | OR     | X80=                    | So                     |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |             |   |  |                                |              |                  |          | +135=              | <u> </u>               | OR     | +270=                   |                        |  |
| * If the difference in column 1 is less than zero, enter   |             |   |  |                                | r "0" in c   | olumn 2          | l        | TOTAL              | 395                    | OR     | TOTAL                   | 7%                     |  |
| CLAIMS AS AMENDED - PART II  |             |   |  |                                |              |                  |          | OTHER THAN         |                        |        |                         |                        |  |
| _  |             | (Column 1)                                | - 1955 - 1955 - 1955 - 1955 - 1955 - 1955 - 1955 - 1955 - 1955 - 1955 - 1955 - 1955 - 1955 - 1955 - 1955 - 195 | (Colur                         |              | (Column 3)       |          | SMALL              | ENTITY                 | OR     | SMALL                   | ENTITY                 |  |
| AMENDMENT A  |             | REMAINING<br>AFTER<br>AMENDMENT           |  | NUM<br>PREVIO<br>PAID          | BER<br>OUSLY | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE                    | ADDI-<br>TIONAL<br>FEE |  |
|  | Total       | *   | Minus  | **                             |              | = ,              |          | X\$ 9=             |                        | OR     | X\$18=                  |                        |  |
| AME  | Independent | *   | Minus  | ***                            | F OL A114    | <u> </u> =       |          | X40=               |                        | OR     | X80=                    |                        |  |
|  | FIRST PRESE | NTATION OF M                              | ULTIPLE DEF  | PENDEN                         | CLAIM        |                  |          | +135=              |                        | OR     | +270=                   |                        |  |
|  |             |   |  |                                |              |                  | L        | TOTAL              |                        | اما    | TOTAL<br>ADDIT. FEE     |                        |  |
| (Column 1) (Column 2) (Column 3)   |             |   |  |                                |              |                  |          | ADDIT. FEE         |                        |        | AUDII. FEE              |                        |  |
| AMENDMENT B  |             | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGH<br>NUM<br>PREVIO<br>PAID  | BER<br>OUSLY | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE                    | ADDI-<br>TIONAL<br>FEE |  |
|  | Total       | *   | Minus  | **                             |              | =                |          | X\$ 9=             |                        | OR     | X\$18=                  |                        |  |
|  | Independent | *   | Minus  | ***                            | CLAINA       | -                |          | X40=               |                        | OR     | X80=                    |                        |  |
| <u> </u>   | FIRST PRESE | NTATION OF MI                             | JLIIPLE DEP  | ENDENI                         | CLAIM        |                  | <b>'</b> | +135=              |                        | OR     | +270=                   |                        |  |
|  |             |   |  |                                |              |                  | L        | TOTAL<br>DDIT. FEE |                        |        | TOTAL<br>ADDIT. FEE     |                        |  |
|  |             | (Column 1)                                |  | (Colur                         | nn 2)        | (Column 3)       | _        |                    |                        |        |                         |                        |  |
| AMENDMENT C  |             | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |  | HIGH<br>NUMI<br>PREVIO<br>PAID | BER<br>DUSLY | PRESENT<br>EXTRA |          | RATE               | ADDI-<br>TIONAL<br>FEE |        | RATE                    | ADDI-<br>TIONAL<br>FEE |  |
|  | Total       | *   | Minus  | **                             |              | =                |          | X\$ 9=             |                        | OR     | X\$18=                  |                        |  |
|  | Independent | *   | Minus  | ***                            |              | =                |          | X40=               |                        | OR     | X80=                    |                        |  |
|  |             | NTATION OF MI                             | <del>-</del> .   | •                              |              | <u> </u>         |          | +135=              |                        | OR     | +270=                   |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |             |   |  |                                |              |                  |          |                    |                        |        |                         |                        |  |
|  |             |   |  |                                |              |                  | r four   | nd in the app      | ropriate box           | in col | umn 1.                  |                        |  |